

DEPARTMENT OF HEALTH AND HUMAN SERVICES

NAVAJO AREA INDIAN HEALTH SERVICE



VACANCY ANNOUNCEMENT CH-09-19

OPENING DATE
JANUARY 12, 2009

CLOSING DATEJANUARY 26, 2009

POSITION

COMMUNITY HEALTH DENTAL HYGIENIST

LOCATION AND DUTY STATION

PHS INDIAN HOSPITAL, DENTAL SVS, CHINLE, AZ

GRADE/SALARY

GS-682-08, \$42,214 - \$54,879 PER ANNUM

NUMBER OF VACANCIES

ONE VACANCY (076836)

APPOINTMENT

PERMANENT TEMP APPT NTE: **WORK SCHEDULE**

● FULL TIME PART TIME INTERMITTENT

AREA OF CONSIDERATION

COMMUTING AREA NAVAJO AREA WIDE

IHS WIDE
 DHHS WIDE

SUPERVISORY/MANAGERIAL

YES, MAY REQUIRE ONE-YEAR PROBATION

NO

PROMOTION POTENTIAL

YES, TO GRADE:

NO KNOWN POTENTIAL

HOUSING

• GOVERNMENT HOUSING AVAILABLE PRIVATE HOUSING ONLY

TRAVEL/MOVING

 MAY BE PAID FOR ELIGIBLE EMPLOYEE NO EXPENSES PAID

DUTIES: Responsible for ascertaining the oral health status of the childhood population regarding carious oral conditions using a variety of screening and information gathering methods. Special problems such as nursing bottle caries, early childhood rampant decay, juvenile periodontitis, and diabetic complications, are evaluated at the service unit level and incorporated into the prevention program. Organizes and conducts surveys, analyzes field activities and initiates action for improving oral health services among schools, Headstart and other community based programs. Develops a plan to address the Service Unit Early Childhood Caries Intervention Program priorities to utilize available HIS, tribal ad outside resources toward improving oral health status of the childhood population. Evaluates program results and provides the Chief of the Dental Program with recommendations to modify the program, based on the described outcomes. Conducts surveys and specials studies to evaluate the effectiveness of the oral health program and to recommend new or improved methods of disease prevention, develops teaching aids and materials to be used to stimulate behavioral change and improve the level of oral health in the Native American Community. Instructs patients at chair side in oral hygiene, brushing and flossing techniques and periodontal aids that increase the amount of stimulation to the periodontium. Plans and adapts instructions in home care techniques, tailoring them to the oral hygiene needs and oral problems of individual patients, explains to patients the causes of periodontal disease, tooth decay, and the importance of diet as it relates to oral and systemic health. Prepares and compiles necessary administrative records and reports (i.e. such as those regarding participation in oral health programs and recommendations for modifying or improving them). The hygienist reviews patient's medical and dental history for evidence of pas and present conditions such as medical illnesses and use of drugs that may complicate or alter dental hygiene treatment. Examines the teeth and surrounding tissues for evidence of plague and periodontal disease and chart findings, inspects the mouth and throat for evidence of disease such as oral cancer, interprets routine X-rays to identify tooth structures, calculus, and abnormalities such as cavities and deep periodontal pockets. Provides educational programs to dentists, dental assistants, dental hygienists, medical staff, community health representatives, other health workers, teachers, school officials, etc., who interact with the targeted childhood population regarding appropriate strategies to prevent dental decay. Responsible for community programs for the prevention of dental disease within the geographical boundaries of the Service Unit. Including management of: school based sealant programs, school based fluoride rinse programs, and community water fluoride delivery. Publishes newsletters and makes presentations at conferences/meetings. Performs other duties as assigned.





QUALIFICATION REQUIREMENTS: YOUR DESCRIPTION OF WORK EXPERIENCEL, LEVEL OF RESPONSIBILITY, AND ACCOMPLISHMENT WILL BE USED TO DETERMINE THAT YOU MEET THE FOLLOWING REQUIREMENTS.

POSITIVE EDUCATION REQUIRED: YES LICENSURE REQUIRED: YES

BASIC REQUIREMENTS: Note: Public Law 97-35 requires that persons who administer radiologic procedures meet the credentialing standards in 42 CFR Part 75. Essentially, they must (1) have successfully completed an educational program that meets or exceeds the standards described in that regulation, and is accredited by an organization recognized by the Department of Education, and (2) be certified as radiographers in their field. The following meet these requirements:

- Persons employed by the Federal Government as radiologic personnel prior to the effective date of the regulation (January 13, 2986) who show evidence of current or fully satisfactory performance or certification of such from a licensed practitioner such as a doctor of medicine, osteopathy, dentistry, podiatry, or chiropractic who prescribes radiologic procedure to others.
- 2. Persons first employed by the Federal Government as radiologic personnel after the effective date of the regulation who (a) received training from institutions in a State or foreign jurisdiction that did not accredit training in that particular field at the time of graduation, or (b) practiced in a State or foreign jurisdiction that did not license that particular field or did not graduate from an accredited educational program, provided that such persons show evidence of training, experience, and competence as determined by OPM or the employing agency.

<u>IN ADDITION TO BASIC REQUIREMENTS:</u> Candidates must have had 52 weeks of specialized experience equivalent to the GS-07 grade level to qualify for the GS-08 grade level.

SPECIALIZED EXPERIENCE: Qualifying experience for clinical dental hygienist includes experience in performing oral prophylactic care and in providing oral health educational services to patients. (1) performing advanced oral prophylactic, therapeutic, and preventive procedures in cases of periodontal diseases or inflammation or on patient with other medical or dental problems, (2) placing temporary fillings, and (3) finishing amalgam restorations. Applicants for positions involving the use of x-rays must have had experience in taking and interpreting x-rays. Experience in preparing and conducting educational lectures and demonstrations on dental hygiene, planning public health problems, providing advice and policy guidance to dental personnel on public health matters, and recommending improved methods of dental hygiene.

EVALUATION OF EDUCATION: The academic curriculum in dental hygiene must have been accredited by the Commission on Dental Accreditation, American Dental Association.

<u>SELECTIVE PLACEMENT FACTOR</u>: Licensure: Applicants must be currently licensed to practice as a dental hygienist in a State or territory of the United States or the District of Columbia.

<u>TIME-IN-GRADE REQUIREMENTS:</u> Candidates applying under the provisions of the Merit Promotion Plan must have completed 52 weeks of specialized experience equivalent to the GS-07 grade level to qualify for the GS-08 grade level.

CONDITIONS OF EMPLOYMENT: Immunization requirements- all persons born after 12-31-56 must provide proof of immunity to Rubella and Measles. Serology testing to confirm immunity and/or immunization will be provided free of charge. Special consideration may be allowed to individuals, who are allergic to a component of a vaccine, have a history of severe reaction to a vaccine, or who are currently pregnant. This applies to candidates for positions in any Service Unit or any Area Office position that requires regular work at a Service Unit.

REASONABLE ACCOMMODATION: This agency provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. The decision on granting reasonable accommodation will be on a case-by-case basis.

<u>LEGAL AND REGULATORY REQUIREMENTS:</u> Candidates must meet time-after-competitive appointment, time-in-grade, and qualification requirements by the closing date of the vacancy announcement.

NOTE: Refer to OPM Handbook Qualification Standards, Series GS--682 for complete information. For more complete information contact your Servicing Personnel Office.

WHO MAY APPLY:

<u>MERIT PROMOTION PLAN (MPP) CANDIDATES:</u> Applications will be accepted from status eligible (e.g., reinstatement eligible and current permanent employees in the competitive Federal service) and from current permanent IHS employees in the Excepted Service who are entitled to Indian Preference.

EXCEPTED SERVICE EXAMINING PLAN (ESEP) CANDIDATES: Applications will be accepted from individuals entitled to Indian Preference. Current permanent IHS Excepted Service employees and Competitive Service employees or Reinstatement eligible entitled to Indian Preference may also apply under the provisions of the Indian Health Service Examining Plan. These candidates MUST indicate on their resumes or, application, whether their resume or application is submitted under the IHS Excepted Service Examining Plan, the IHS Area Merit Promotion Plan or both.

Applications will also be accepted from individuals eligible for non-competitive appointment (e.g., applicants eligible for appointment under the Veterans Readjustment Act, the severely handicapped, those with a 30% or more compensable service-connected disability).

<u>Veterans</u>: Veterans who are preference eligibles or who have been separated from the armed forces under honorable conditions after 3 years or more of continuous active service may apply.

INFORMATION FOR DISPLACED EMPLOYEES REQUESTING SPECIAL SELECTION PRIORITY CONSIDERATION UNDER THE INTERAGENCY CAREER TRANSITION ASSISTANCE PROGRAM (ICTAP).

If you are a displaced Federal employee you may be entitled to receive special priority consideration under the ICTAP. To receive this priority consideration, you must:

- 1. Be a displaced Federal employee. You must submit a copy of the appropriate documentation such as RIF separation notice, a letter from OPM or your agency documenting your priority consideration status with your application package. The following categories of candidates displaced employees.
 - A. Current or former career or career-conditional (tenure groups I or II) competitive service employees who:
 - 1. Received a specific RIF separation notice; or
 - 2. Separated because of a compensable injury, whose compensation has been terminated, and whose former agency certifies that it is unable to place; or
 - 3. Retired with a disability and show disability annuity has been or is being terminated, or
 - 4. Upon receipt of a RIF separation notice retired on the effective date of the RIF and submits a Standard Form 50 that indicates "Retirement in lieu of RIF", or
 - 5. Retired under the discontinued service retirement option, or
 - 6. Was separated because he/she declined a transfer of function or directed reassignments to another commuting area OR
 - B. Former Military Reserve or National Guard Technician who are receiving a special Office of Personnel Management (OPM) disability retirement annuity under section 8337 (h) or 84567 of Title 5 United States Code.
- 2. Be applying for a position at or below the grade level of the position from which you have been separated. The position must not have a greater promotion potential than the position from which you were separated.
- 3. Have a current (or last) performance rating of record of at least fully successful or equivalent. This must be submitted with your application package. (This requirement does not apply to candidates who are eligible due to compensable injury or disability retirement).
- 4. Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
- 5. File your application by the vacancy announcement closing date and meet all the application criteria (e.g., submit all required documentation, etc.)
- 6. Be rated well qualified by achieving a score of 80 on a rating scale of 70 to 100 for the position including documented selective factors, quality ranking factor, physical requirements with reasonable accommodations and is able to satisfactorily perform the duties of the position upon entry.

EVALUATION CRITERIA: Evaluation will be made of Experience, Performance Appraisals, Training, Letters of Commendation, Self-Development, Awards and Outside Activities, which are related to this position. To receive full credit for your qualifications provide a narrative statement that fully describes all aspects of your background as they relate to the knowledge, skills, and abilities (KSA's) outlined below and show the level of accomplishments and degree of responsibility.

The KSA's in your narrative statement will be the principle basis for determining whether or not you are highly qualified for the position. Describe your qualifications in each of the following:

- 1. ABILITY TO PLAN, IMPLEMENT, AND MANAGE A DENTAL HPDP PROGRAM.
- 2. ABILITY TO WORK INDEPENDENTLY.
- 3. ABILITY TO REVIEW, ANALYZE, AND COMPILE DATA.
- 4. <u>ABILITY TO MEET, DEAL, AND COMMUNICATE ORALLY AND IN WRITING WITH A VARIETY OF INDIVIDUALS.</u>

(SEE ATTACHED SUPPLEMENTAL QUESTIONNAIRE FOR DEFINITIONS)

NOTE: "Declaration for Federal Employment" (OF-306) AND Addendum to OF-306 (Child Care & Indian Child Care Worker Position), BOTH forms, must be completed and submitted with original signature to determine your suitability for Federal employment, to authorize a background investigation, and to certify the accuracy of all the information in your application. Responding "YES" to any one of these two questions can make you ineligible for employment in this position. If you make a false statement in any part of your application, you may not be hired; you may be fired after you begin work; or you may be fined or jailed.

"DESIGNATION OF CHILD CARE POSITION UNDER PL 101-630 AND PL 101-647"

HOW AND WHERE TO APPLY: All applicants must submit one of the following to the PHS Indian Hospital, Division of Human Resources, P. O. Drawer PH, Chinle, AZ 86503, BY CLOSE OF BUSINESS (5:00 P.M.) ON THE CLOSING DATE:

- 1. OF-612, Optional Application for Federal Employment; or,
- 2. *Resume
- 3. *Any other written application format; <u>PLUS</u> transcripts of college courses; copy of your most recent performance appraisal and any other necessary documentation pertinent to the position being filled.

A copy of an Official Bureau of Indian Affairs Preference Certificate, BIA Form 4432, signed by the appropriate BIA Official, must be submitted if the applicant claims Indian Preference. Navajo Area Indian Health Service employees claiming Indian Preference need not submit the BIA Form 4432, but *MUST* state that such documentation is contained in their Official Personnel Folder.

*INFORMATION REQUIRED FOR RESUMES AND OTHER APPLICATION FORMATS: Resumes or other application formats must contain all of the information listed below in sufficient detail to enable the personnel office to make a determination that you have the required qualifications for the position. SPECIFICALLY, THE INFORMATION PROVIDED UNDER #8 (HIGH SCHOOL), #9 (COLLEGES AND UNIVERSITIES), AND #10 (WORK EXPERIENCE) WILL BE USED TO EVALUATE YOUR QUALIFICATIONS FOR THIS POSITION. FAILURE TO INCLUDE ANY OF THE INFORMATION LISTED BELOW MAY RESULT IN LOSS OF CONSIDERATION FOR THIS POSITION.

- 1. Announcement Number, Title and Grade of the position for which you are applying.
- 2. Full Name, Full Mailing Address, and Day and Evening Phone Numbers (with Area Codes).
- 3. Social Security Number.
- 4. Country of Citizenship.
- 5. Veteran's Preference Certificate: DD-214, and/or SF-15 if claiming 10 point preference. Veterans' Preference is not applicable to current DHHS permanent employees, Federal employees with competitive status, or reinstatement eligibles.
- 6. Copy of the latest SF-50, Notification of Personnel Action, if current or prior Federal employees.
- 7. Highest Federal civilian grade held (give series and dates held).
- 8. High School: Name, City, State (zip code if known) and date of Diploma or GED.
- 9. Colleges and Universities: Name, City, State (Zip code if known), majors, type and year of any degrees received (if no degree, show total semester or quarter hours earned); preferably attach transcripts.
- 10. Work experience (Paid and Non-Paid); Job title, duties and accomplishments, employer's name and address, supervisor's name and phone number, starting and ending dates (month/year), hours per week, and salary.
- 11. Indicate if we may contact your current supervisor.
- 12. Job related training courses, skills, certificates, registrations and licenses (current only), honors, awards, special accomplishments.

<u>NOTE</u>: APPLICANTS WHO DO NOT SUBMIT THE INFORMATION REQUESTED ABOVE WILL BE GIVEN CREDIT ONLY FOR THE INFORMATION THEY PROVIDE AND MAY NOT, THEREORE, RECEIVE FULL CREDIT FOR THEIR VETERAN'S PREFERENCE DETERMINATION, EDUCATION, TRAINING AND/OR EXPERIENCE.

THIS OFFICE WILL NOT SOLICIT ADDITIONAL INFORMATION, WE WILL NOT ACCEPT APPLICATIONS RECEIVED BY FAX, E-MAIL OR ELECTRONIC RESUMES.

FOR MORE INFORMATION, CONTACT: Lori Smith, Human Resources Specialist, 928/674-7033 or email at lorraine.smith@ihs.gov

HUMAN RESOURCE CLEARANCE	DATE
PERSONAL RELATIONSHIP OR OTHER TYPES OF PERSONAL FA	AVORITISM OR PATRONAGE.
NON-MEMBERSHIP IN AN EMPLOYEE ORGANIZATION. PROMOT	•
ORIENTATION, NATIONAL ORIGIN, POLITICS, MARITAL STATUS	
DISCRIMINATION FOR NON-MERIT REASONS SUCH AS	
EQUAL EMPLOYMENT OPPORTUNITY: SELECTION FOR POSIT	IONS WILL BE BASED SOLELY ON MERIT WITH NO
the Federal Government, you must (subject to certain exemptions) be	registered with the Selective Service System.
SELECTIVE SERVICE CERTIFICATION: If you are a male born after	
Preference Act. In other than the above, the IHS is an Equal Opportuni	ity Employer.
INDIAN PREFERENCE: Preference in filling vacancies is given to qu	
issued if the position becomes vacant or to fill an identical additional po	osition in the same geographic location.

ADDITIONAL SELECTIONS: Additional or alternate selections may be made within 90 days of the date of the certificate

EACH APPLICATION FORM AND DOCUMENT FORM MUST BE INDIVIDUALLY IDENTIFIED BY THIS ANNOUNCEMENT NUMBER <u>CH-09-19</u>. ALL ORIGINAL DOCUMENTS AND COMPLETED APPLICATION FORMS MUST BE DUPLICATED BY THE APPLICANT BEFORE SUBMISSION AS WE DO NOT HONOR REQUESTS FOR COPIES. COMPLETED FORMS WHEN SUBMITTED BECOME THE PROPERTY OF THIS PERSONNEL OFFICE AND WILL NOT BE RETURNED

SUPPLEMENTAL QUESTIONNAIRE COMMUNITY HEALTH DENTAL HYGIENIST, GS-682-08

1.	ABILITY TO PLAN, IMPLEMENT AND MANAGE A DENTAL HPDP PROGRAM. The person in this position should have the ability to plan, implement, ad manage a dental HPDP Program in order to meet the oral health needs of the target group throughout the Service Unit. What in your background shows you possess this ability?
	What was the duration of these activities?
	Who can verify this information? (Please provide a telephone number.)
2.	ABILITY TO WORK INDEPENDENTLY. This is the ability to plan, organize, and prioritize work under pressure, with little or no supervision and the ability to function effectively and maintain control and composure under stressful working conditions. What in your background shows you possess this ability?
	What was the duration of these activities?
	Who can verify this information? (Please provide a telephone number.)

3.	ABILITY TO REVIEW, ANALYZE, AND COMPILE DATA. The person in this position should have the ability to review, analyze and compile data from various sources (i.e., surveys, special studies, and reports), to prepare written reports for statistical and other information to evaluate the effectiveness for the oral health program and to recommend new or improved methods of disease prevention. What in your background shows you possess this ability?
	What was the duration of these activities?
	Who can verify this information?
4.	ABILITY TO MEET, DEAL, AND COMMUNICATE ORALLY AND IN WRITING WITH A VARIETY OF INDIVIDUALS. This is the ability to establish and maintain positive interpersonal relationships by utilizing tact, diplomacy, and mature judgment with a variety of individuals. The purpose of contact is to obtain and convey information within the organization. What in your background shows you possess this ability?
	What was the duration of these activities?
	Who can verify this information? (Please provide a telephone number.)
	CERTIFICATION IFY that all of the statements made in the above questionnaire are true, complete, and correct to the best knowledge and belief, and are made in good faith.
	SIGNATURE OF APPLICANT DATE SIGNED